



<i>No.</i>	502.01
<i>Chapter:</i>	Drug Screening for HPRP Participants
<i>Topic:</i>	<i>Toxicology screens: randomness, frequency, call requirements, tests</i>

As a condition of each participant's recovery treatment plan, the participant is required to submit to random toxicology screens (drug tests). The toxicology screen may include approved chemical, biological, physical, or instrumental analysis, administered for the purpose of determining the presence or absence of a drug or its metabolites. This procedure describes the screen requirements, the conditions under which a specimen is considered to be a positive or abnormal test result, and approved toxicology screening methods.

RANDOMNESS

The testing frequency requirements will be randomly administered to help ensure both deterrence and detection.

**FREQUENCY OF
SCREENS**

The frequency is subject to change each quarter while the participant is in the program. Participants who show an established pattern of compliance in all aspects of their participation in the HPRP will be tested less frequently over the course of the HPRP contract.

The HPRP is responsible for determining the frequency testing cycle each quarter and notifying the participant, collection site, and testing laboratory of any changes.

CALL REQUIREMENT

Each weekday (including holidays), the participant must call the toll free phone line. This toll-free number will contain a message that states which groups of color-coded participants are to provide toxicology screens. It is the responsibility of each participant to call the toll-free phone number each weekday (Monday-Friday) to find out if it is his or her day to complete a toxicology screen.

DEADLINE

The HPRP participant must complete any required toxicology screens no later than 6:00 p.m. of the same day as the color is called to comply with the testing requirement.

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Deadline <i>(continued)</i>	Late Screens - If the participant does not provide the toxicology screen or does so <u>after the 6:00 p.m.</u> deadline time has passed, and there are no acceptable extenuating circumstances, the toxicology screen shall be considered to be late. Late screens may result in additional progressive requirements or dismissal from the program.
CHAIN OF CUSTODY	This is the process and form used to maintain control and accountability from initial collection to final disposition of the specimen. The HPRP participant is responsible for sealing the sample and providing the initial chain of custody documentation.
TOXICOLOGY	<p>The HPRP will specify in the recovery monitoring agreement, the type and frequency of the toxicology screen to be used. The type of screen to be used will generally be a urine drug analysis (UDA). However, if clinically indicated, other reliable methods may be substituted for the UDA. In the first six months of participation in the HPRP, this substitution may not occur more than every other toxicology screen.</p> <p>Any positive screen result using one of these alternative methods, such as a saliva test or breathalyzer, must be immediately followed with a urine drug analysis or blood alcohol concentration test at the test site.</p>
POSITIVE SCREEN RESULTS	Positive Screens – A screen that shows positive evidence of any non-approved substance. Positive screens may result in additional progressive requirements, such as removal from work, additional treatment, or dismissal from the program.
ABNORMAL SCREEN RESULTS	<p>It is the responsibility of each participant to notify HPRP of problems with performing toxicology screens, or any anticipated problems. Abnormal screen results (described below) are reported to the HPRP. The consequences of abnormal screen results may include additional progressive requirements, such as removal from work, additional treatment, or dismissal from the program.</p> <p>Adulterated Specimen - If the specimen meets one or more of the following criteria, the specimen is considered to be adulterated. Adulterated tests are reported to the HPRP.</p>

ABNORMAL SCREEN RESULTS (continued)***Adulterated specimen (continued) -***

- temperature falling outside the specified range of 32.5 to 37.7 degrees Celsius or 90.5 - 99.8 degrees Fahrenheit
- unusual urine color or signs of contaminants in the urine
- nitrites present in specimen equal to or greater than 500 mg/dL
- glutaldehyde present in specimen
- other adulterant(s) detected in the specimen

Diluted Specimen - If the specimen meets one of the following criteria, it is considered to be diluted. Diluted specimens are reported to the HPRP.

- creatinine level less than 10 mg/dL
- creatinine level less than 20 mg/dL with specific gravity less than 1.003

Substituted Specimen - If the specimen does not exhibit the clinical signs or characteristics associated with human urine, the test will be reported as substituted to the HPRP.

NOTIFICATION AND DOCUMENTATION

It is the responsibility of the participant to notify the HPRP of any medications (both prescription and non-prescription), which are being taken on a regular basis. The presence of such drugs may be disclosed during the testing process. Failure to provide appropriate information and documentation (if requested) may result in the test being considered positive or abnormal.

The participant should follow the Recovery Monitoring Agreement for written guidelines and discuss any questions with the case care coordinator to ensure proper approvals and documentation are contained in the file.

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**APPROVED
TOXICOLOGY
METHODS**

The HPRP will maintain a list of all approved alternative toxicology screen methods. As any new toxicology screening test is considered, the HPRP contractor is to provide information about the test to the Health Professional Recovery Committee for approval prior to use with participants.

**APPROVED
TOXICOLOGY
SCREENS**

The approved toxicology screens and the date(s) of approval are shown here:

1. **Urine Drug Analysis (UDA):**
Approved: June 1995.
2. **Saliva Tests** (also known as “Alco Sticks”):
Approved: September 19, 2000.
3. **Breathalyzer:**
Approved: September 19, 2000.
4. **Blood Alcohol Concentration**
Approved: March 20, 2001
5. **Hair**
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